Political Committee REPORT OF RECEIPTS AND DISBURSEMENTS 2021 Annual Report

W. Zanata



Name of Committee Rankin County Republican	Executive Committee	
Address 109 Langford Drive	City/State/Zip_Brandon, MS 39047	
Telephone 601-421-6617	Fax	
Treasurer Bill Russell	Email Addressbrussell02@yahoo.com	
	report TYPE OF REPORT agh December 31, 2021)	
Termination Report (Committee will no longer accept contributions, make campaign expenditures, has no outstanding campaign debt obligation) Required to terminate reporting obligations		
IMPORTANT		

- Annual Reports are mandatory UNLESS the political committee filed all 2021 Periodic Reports OR the political committee filed a Termination Report prior to December 31, 2021.
- Until a committee files a Termination Report, annual, periodic and pre-election reports must be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- The receiving office must be in actual receipt of the required reports by 5:00 p.m. on the deadline. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Political committees supporting or opposing candidates for State, State District, or Legislative Office file with the Secretary of State's Office. Political committees supporting or opposing candidates for county office or county ballot measures file with the circuit clerk's office. Political committees supporting or opposing municipal candidates or municipal ballot measures file with the municipal clerk's office.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

JAN.1, 2021 CASH ON HAND BALANCE		\$3903.13	
	Itemized (+)	Non-Itemized (=)	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$24043	\$7328.97	\$31371.97
TOTAL AMT OF DISBURSEMENTS	\$19964.41	\$ 195.14	\$20159.55
DEC. 31, 2021 CASH ON HAND B	ALANCE		\$15,115.55
I certify that I have examined this report an	to the best of my kn		ue, accurate, and complete. $20 - 202 = 2$
Brilland Signature of Director or Treasurer	1	Date	0-2

Authority: Miss. Code Ann. §23-15-801, et. seq.

Penalties: Failure to timely submit required reports in accordance with the applicable statute(s) may result in the imposition of a civil penalty in the amount of \$50 per day for ten (10) days and/or prosecution pursuant to Miss. Code Ann. §§ 23-15-811 and 813 (1972).

Reporting period 1/1/21

through 12/31/21

A. Source: Corporation PAC Individual Loan		Amount of each
0 0 0	Date (Mo., Day, Year)	receipt
Other (please specify) Full name Angie Calhoun	11 / 23 / 24	\$ 444
Mailing Address PO BOX 368	_'_'_	\$
City, State, Zip Code Puckett, MS 39151	//	\$
Name of Employer (Required) Ranch House and Calhoun Equine Center	_/_/_	\$
Occupation (Required) Business Owner	Aggregate year–to-date	^{\$} 444
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name AvidXChange Inc	04 / 29 / 24	^{\$} 600
Mailing Address PO Box 36250		\$
City, State, Zip Code Charlotte, NC 28236	//_	\$
Name of Employer (Required)	_''_	\$
Occupation (Required)	Aggregate year–to-date	^{\$} 600
C. Source: OCorporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Baker Law Firm	05 / 07 /21	\$350
Mailing Address PO Box 947		\$
City, State, Zip Code Brandon, MS 39043		\$
Name of Employer (Required)	_'_'_	\$
Occupation (Required)	Aggregate year–to-date	^{\$} 350
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name BBI Inc	05,07,24	\$600
Mailing Address PO Box 320189		\$
City, State, Zip Code Flowood, MS 39232		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	^{\$} 600

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Reporting period 1/1/21

through 12/31/21

A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name Beau Cox	11/23/24	\$100
Mailing Address 103 Langford Drive	05, 07, 21	^{\$} 100
City, State, Zip Code Brandon, MS 39047	05,10,21	^{\$} 500
Name of Employer (Required) Tara Cares	11/15/21	\$237
Occupation (Required) Pharmacist	Aggregate year–to-date	\$continued below
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Beau Cox (continued from above)	04 / 29 / 24	^{\$} 50
Mailing Address	·	\$
City, State, Zip Code		\$
Name of Employer (Required)	_//	\$
Occupation (Required)	Aggregate year–to-date	\$987
C. Source: Ocorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Gerard Gibert	05 / 07 /21	^{\$} 315
Mailing Address 146 Woodmont Way	12 / 06 / 21	^{\$} 100
City, State, Zip Code Ridgeland, MS 39157		\$
Name of Employer (Required) SuperTalk Mississippi	_'_'_	\$
Occupation (Required) Radio Host	Aggregate year–to-date	^{\$} 415
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Butch Lee	05,07,24	\$200
Mailing Address 129 Richmond Dr	12,06,21	\$75
City, State, Zip Code Brandon, MS 39042		\$
Name of Employer (Required) City of Brandon	_'_'_	\$
Occupation (Required) Mayor	Aggregate year–to-date	\$275

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Reporting period 1/1/21

through 12/31/21

TIENIZED RECEII 15			
A. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each receipt	
Other (please specify)	(Mo., Day, Year)	this period	
Buddy Medlin and Associates Inc	11 / 23 / 24	^{\$} 600	
Mailing Address PO Box 24087	//	\$	
City, State, Zip Code Jackson, MS 39225	_'_'_	\$	
Name of Employer (Required)		\$	
Occupation (Required)	Aggregate year–to-date	^{\$} 600	
B. Source: OCorporation OPAC Individual OLoan	Date	Amount of each receipt	
Other (please specify)	(Mo., Day, Year)	this period	
Paul Holley	04 / 29 / 24	^{\$} 100	
Mailing Address 103 BonneVie Drive	12,06,21	^{\$} 100	
City, State, Zip Code Brandon, MS 39047	_'_'_	\$	
Name of Employer (Required) Paul Holley PLLC		\$	
Occupation (Required) Lawyer	Aggregate year–to-date	^{\$} 200	
C. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each receipt	
Other (please specify)	(Mo., Day, Year)	this period	
Full name Douglas Inc	05,07,21	^{\$} 740	
Mailing Address 4225 Industrial Drive		\$	
City, State, Zip Code Jackson, MS 39209	//	\$	
Name of Employer (Required)	·//	\$	
Occupation (Required)	Aggregate year-to-date	^{\$} 740	
D. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each receipt	
Other (please specify)	(Mo., Day, Year)	this period	
Full name Southern AgCredit, FLCA	05/07/24	\$1000	
Mailing Address 402 W Parkway Place		\$	
City, State, Zip Code Ridgeland, MS 39157		\$	
Name of Employer (Required)	//	\$	
Occupation (Required)	Aggregate year-to-date	\$1000	

Reporting period 1/1/21

through 12/31/21

A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt	
Other (please specify) Full name Benchmark Engineering and Surveying, LLC	11 / 23 / 24	\$650	
Mailing Address 101 Highpointe Court suite D	_'_'_	\$	
City, State, Zip Code Brandon, MS 39042	//	\$	
Name of Employer (Required)		\$	
Occupation (Required)	Aggregate year–to-date	^{\$} 650	
B. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each receipt	
Other (please specify)	(Mo., Day, Year)	this period	
Jernigan Copeland Attorneys, PLLC	04/29/24	^{\$} 1000	
Mailing Address 970 Ebenezer Blvd		\$	
City, State, Zip Code Madison, MS 39110		\$	
Name of Employer (Required)	//_	\$	
Occupation (Required)	Aggregate year–to-date	^{\$} 1000	
C. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each	
Other (please specify) City	(Mo., Day, Year)	receipt this period	
Full name City Of Pearl	03, 22, 21	^{\$} 120	
Mailing Address PO Box 5948	03/22/21	^{\$} 200	
City, State, Zip Code Pearl, MS 39288		\$	
Name of Employer (Required)	_'_'	\$	
Occupation (Required)	Aggregate year–to-date	\$320	
D. Source: Corporation PAC Individual Loan	Date	Amount of each receipt	
Other (please specify)	(Mo., Day, Year)	this period	
Full name Clyde Miller	05/07/24	\$500	
Mailing Address 309 Monterey Rd	11/15/21	\$435	
City, State, Zip Code Richland, MS 39218	'	\$	
Name of Employer (Required)	_/_/_	\$	
Occupation (Required) Retired	Aggregate year–to-date	\$935	

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Reporting period 1/1/21

through 12/31/21

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A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(WIO., Day, Teal)	this period
Ryan Harper	11 / 23 / 24	^{\$} 500
Mailing Address PO Box 532	//	\$
Pelahatchie, MS 39145	'	\$
Name of Employer (Required) Brandon Discount Drugs	_/_/_	\$
Occupation (Required) Pharmacist	Aggregate year–to-date	^{\$} 500
B. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Group Services Of MS LLC	04 / 29 / 24	^{\$} 600
Mailing Address PO Box 6236	11/23/21	^{\$} 1000
City, State, Zip Code Jackson, MS 39288		\$
Name of Employer (Required)	_/_/_	\$
Occupation (Required)	Aggregate year-to-date	^{\$} 1600
C. Source: Ocorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Stephen Gaines	04/12/21	^{\$} 100
Mailing Address 205 Taylor Way Rd	11/22/21	^{\$} 100
City, State, Zip Code Brandon, MS 39047	_/_/_	\$
Name of Employer (Required) Rankin County	//	\$
Occupation (Required) District 4 Supervisor	Aggregate year–to-date	\$200
D. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Butler Snow	05/07/24	\$500
Mailing Address PO Box 6010		\$
City, State, Zip Code Ridgeland, MS 39158		\$
Name of Employer (Required)	_/_/_	\$
Occupation (Required)	Aggregate year–to-date	\$500

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Reporting period 1/1/21

through 12/31/21

A. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name Comunity Bank	11,23,24	^{\$} 500
Mailing Address PO Box 1568	_/_/_	\$
City, State, Zip Code Brandon, MS 39043		\$
Name of Employer (Required)	_'_'_	\$
Occupation (Required)	Aggregate year–to-date	^{\$} 500
B. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Eagle Pipe and Supply, LLC	04 / 29 / 24	^{\$} 500
450 Industrial Drive	z-//-	\$
City, State, Zip Code Jackson, MS 39209	_'_'_	\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$500
C. Source: Ocorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Brunini, Grantham, Grower and Hewes, PLLC	03, 29, 21	^{\$} 1000
Mailing Address PO Drawer 119		\$
City, State, Zip Code Jackson, MS 39205		\$
Name of Employer (Required)	/	\$
Occupation (Required)	Aggregate yearto-date	^{\$} 1000
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Waggoner Engineering, Inc	05/07/24	\$600
Mailing Address PO Box 12227		\$
City, State, Zip Code Jackson, MS 39236		\$
Name of Employer (Required)	//	\$
Occupation (Required)	Aggregate year–to-date	^{\$} 600

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Reporting period 1/1/21

through 12/31/21

A. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
McNinch Law Firm, PLLC	11 / 23 / 24	^{\$} 1013
Mailing Address 503 Avalon Way Suite A	_/_/_	\$
City, State, Zip Code Brandon, MS 39047		\$
Name of Employer (Required)		\$
Occupation (Required) Attorney	Aggregate year–to-date	^{\$} 1013
B. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
MS Manufactured Housing Association	04 / 29 / 24	\$200
Mailing Address PO Box 320369		\$
City, State, Zip Code Jackson, MS 39232	_'-'-	\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$200
C. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name Keystone Strategies	03,22,21	^{\$} 500
Mailing Address PO Box 947	//	\$
City, State, Zip Code Brandon, MS 39043	_/_/_	\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	^{\$} 500
D. Source: OCorporation OPAC Individual OLoan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name Dana Stringer	05/07/24	\$29
Mailing Address 104 Boxwood Cove	11/15/21	\$334
City, State, Zip Code Brandon, MS 39047	12/06/21	\$50
Name of Employer (Required)		\$
Occupation (Required) Retired	Aggregate year–to-date	^{\$} 413

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Reporting period 1/1/21

through 12/31/21

	10	
A. Source: Corporation PAC Individual Loan	Date (Ma. Day Vaar)	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Freddie Rowell	<u>11</u> , <u>23</u> , <u>24</u>	^{\$} 500
Mailing Address 936 Leesburg Rd		\$
City, State, Zip Code Pelahatchie, MS 39145		\$
Name of Employer (Required) First Commercial Bank		\$
Occupation (Required) Chief Mortgage Banking Officer	Aggregate year–to-date	^{\$} 500
B. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Windham and Lacey PLLC	04/29/21	^{\$} 500
Mailing Address 2708 Old Brandon Rd		\$
City, State, Zip Code Pearl, MS 39208	_'_'	\$
Name of Employer (Required)	_'_'_	\$
Occupation (Required)	Aggregate year–to-date	^{\$} 500
C. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Friends of Michael Guest	05,10,21	^{\$} 500
Mailing Address PO Box 470	12,20,21	^{\$} 50
City, State, Zip Code Brandon, MS 39043		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	^{\$} 550
D. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	this period
Full name William Lucien Smith Jr	05/07/24	\$500
Mailing Address 134 Olympia Fields		\$
City, State, Zip Code Jackson, MS 39211		\$
Name of Employer (Required) Balch and Bingham LLP	//	\$
Occupation (Required) Attorney	Aggregate year–to-date	^{\$} 500

Reporting period 1/1/21

through 12/31/21

A. Source: Corporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify) Full name Hendrix Investments	11 / 23 / 24	\$500
Mailing Address		\$
504 Keywood Cir Ste A	_'_'	Ф
City, State, Zip Code Flowood, MS 39232	_'_'_	\$
Name of Employer (Required)	_/_/_	\$
Occupation (Required)	Aggregate year–to-date	^{\$} 500
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Rankin First EDA	04 / 29 / 24	^{\$} 600
Mailing Address PO Box 129		\$
City, State, Zip Code Brandon, MS 39043	_'_'_	\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	^{\$} 600
C. Source: Ocorporation OPAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name M&G Enterprises Inc Engineering Service	04/21/21	^{\$} 1000
Mailing Address 115 Aerosmith Dr	:	\$
City, State, Zip Code Richland, MS 39218		\$
Name of Employer (Required)	_/_/_	\$
Occupation (Required)	Aggregate year–to-date	^{\$} 1000
D. Source: OCorporation OPAC Individual OLoan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name Robert Odom	05/07/24	\$117
Mailing Address 305 Louis Wilson Dr	05/07/21	\$100
City, State, Zip Code Brandon, MS 39042		\$
Name of Employer (Required) Goodwill Industries	_/_/_	\$
Occupation (Required) Digital Supervisor	Aggregate year–to-date	\$217

Reporting period 1/1/21

through 12/31/21

	10	
A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)		this period
John Beck	11 / 23 / 24	^{\$} 500
Mailing Address 1035 Centre Pointe Dr	_/_/_	\$
City, State, Zip Code Brandon, MS 39042		\$
Name of Employer (Required) Origin Bank		\$
Occupation (Required) Banker	Aggregate year–to-date	^{\$} 500
B. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Risk Management Partners Inc	04 / 29 / 24	^{\$} 500
Mailing Address PO Box 5069	2—1/—/—	\$
City, State, Zip Code Brandon, MS 39047	_'_'_	\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	^{\$} 500
C. Source: OCorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Watkins & Eager PLLC	04, 16, 21	^{\$} 500
Mailing Address PO Box 650		\$
City, State, Zip Code Jackson, MS 39205		\$
Name of Employer (Required)	//	\$
Occupation (Required)	Aggregate year–to-date	^{\$} 500
D. Source: Corporation PAC Individual Coan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name Palmer and Slay PLLC	05/07/24	\$500
Mailing Address PO Box 896		\$
City, State, Zip Code Brandon, MS 39043		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year–to-date	\$500

Reporting period 1/1/21

through 12/31/21

A. Source: Corporation OPAC OIndividual OLoan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Tower Loan of Mississippi LLC	11 / 23 / 24	^{\$} 500
Mailing Address PO Box 320001	_/_/_	\$
City, State, Zip Code Flowood, MS 39232		\$
Name of Employer (Required)	_/_/_	\$
Occupation (Required)	Aggregate year-to-date	^{\$} 500
B. Source: Corporation PAC Individual Loan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
John Taylor	04 / 29 / 24	\$200
Mailing Address 1075 Gluckstadt Rd		\$
City, State, Zip Code Madison, MS 39110	_'_'_	\$
Name of Employer (Required) City of Gluckstadt / Joamco Chemical		\$
Occupation (Required) Alderman of Gluckstadt / Officer	Aggregate year–to-date	\$200
C. Source: Ocorporation OPAC OIndividual OLoan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name SL Alman III	11/22/21	^{\$} 334
Mailing Address 245 Hurdle Rd		\$
Pelahatchie, MS 39145	_/_/_	\$
Name of Employer (Required) Stagelite Sound	/	\$
Occupation (Required) Business Owner	Aggregate year-to-date	^{\$} 334
D. Source: Corporation OPAC Individual Cloan	Date	Amount of each receipt
Other (please specify)	(Mo., Day, Year)	this period
Full name	05/07/24	\$
Mailing Address		\$
City, State, Zip Code		\$
Name of Employer (Required)	//	\$
Occupation (Required)	Aggregate year-to-date	\$

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Reporting period 1/1/2021

through 12/31/2021

ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated Prior to January 1, 2018 or	On or After Ja	nuary 1, 2018
A. Full name Hallett Group Marketing	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 502 Grants Ferry Rd Suite C	03 / 02 / 21	\$ 298.53
City, State, Zip Code Brandon, MS 39047	11,09,21	\$ 28.89
Purpose of Disbursement (Optional) Name Badges	Aggregate Year-to-date	\$ 327.42
B. Full name United Republican Fund	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 415 Yazoo St	04 / 29 / 24	\$ 500
City, State, Zip Code Jackson, MS 39201	_'_'_	\$
Purpose of Disbursement (Optional) Donation	Aggregate Year-to-date	\$ 500
C. Full name City of Brandon	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1000 Municipal Drive	11,23,21	\$ 200
City, State, Zip Code Brandon, MS 39043		\$
Purpose of Disbursement (Optional) Veterans Day Breakfast	Aggregate Year-to-date	\$ 200
D. Full name Mclain Lodge	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 314 Clark Creed Rd	12,09,21	\$ 5031.46
City, State, Zip Code Brandon, MS 39047	12,22,21	\$ 257.76
Purpose of Disbursement (Optional) RCREC Christmas Dinner	Aggregate Year-to-date	\$ 5289.22
E. Full name Carlos Calabrese	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 625 Wendover Dr	12,06,21	\$ 500
City, State, Zip Code Ridgeland, MS 39157	·	\$
Purpose of Disbursement (Optional) RCREC Christmas Dinner Entertainment	Aggregate Year-to-date	\$ 500
F. Full name Friends of Butch Lee	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 129 Richmond Drive	05 / 18 / 21	\$ 500
City, State, Zip Code Brandon, MS 39042		\$
Purpose of Disbursement (Optional) Campaign Donation	Aggregate Year-to-date	\$ 500

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Reporting period 1/1/21

through 12/31/21

ITEMIZED DISBURSEMENTS

A. Full name	Data	Amount of each
Friends of Gary Spurgeon	Date (Mo., Day, Year)	disbursement this period
Mailing Address 2008 Stable Bend Dr	05, 17,21	\$ 250
City, State, Zip Code Pearl, MS 39208	//	\$
Purpose of Disbursement (Optional) Campaign Donation	Aggregate Year-to-date	\$ 250
B. Full name Friends of Monica Corley	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 718 S College St	04 / 29 / 24	\$ 250
City, State, Zip Code Brandon, MS 39042	_'_'_	\$
Purpose of Disbursement (Optional) Campaign Donation	Aggregate Year-to-date	\$ 250
C. Full name Kristin Bain	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 270 Evergreen Drive	05,07,21	\$ 1019.76
City, State, Zip Code Brandon, MS 39042		\$
Purpose of Disbursement (Optional) Reimbursement for Golf Tournament expenses and Funeral Spray	Aggregate Year-to-date	\$ 1019.76
D. Full name Alpha Graphics	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 115 Metroplex Blvd	03/11/21	\$ 758.36
City, State, Zip Code Pearl, MS 39208	04/09/21	\$ 787.68
Purpose of Disbursement (Optional) Golf Tournament Expenses	Aggregate Year-to-date	\$ See below
E. Full name Alpha Graphics Continued	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	05/11/21	\$ 1186.97
City, State, Zip Code		\$
Purpose of Disbursement (Optional) Golf Tournament Expenses	Aggregate Year-to-date	\$ 2733.01
F. Full name Baypointe Golf Club	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 800 Bay Pointe Dr	05 / 14 / 21	\$ 3945
City, State, Zip Code Brandon, MS 39047		\$
Purpose of Disbursement (Optional) Golf Tournament Expense	Aggregate Year-to-date	\$ 3945

through 12/31/21

ITEMIZED DISBURSEMENTS

4. Full name MS Christian Living	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		\$
573 US 51	05, 17, 21	450
City, State, Zip Code Ridgeland, MS 39157	//	\$
Purpose of Disbursement (Optional)	A	<u> </u>
Ad	Aggregate Year-to-date	450
3. Full name MS Republican Party	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 415 Yazoo St #200	<u>04</u> , <u>29</u> , <u>2</u>	\$ 3000
City, State, Zip Code Jackson, MS 39201		\$
Purpose of Disbursement (Optional) Fundraiser Dinner	Aggregate Year-to-date	\$ 3000
C. Full name MS Federation of Republican Women	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 5240 Wedgewood Dr	07,19,21	\$ 500
City, State, Zip Code Olive Branch, MS 38654		\$
Purpose of Disbursement (Optional) Donation	Aggregate Year-to-date	\$ 500
D. Full name Rankin County Republican Women	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1035 Woodbridge Dr	12,01,21	\$ 500
City, State, Zip Code Brandon, MS 39047	·—/-—/-	\$
Purpose of Disbursement (Optional) Salute to Women Event	Aggregate Year-to-date	\$ 500
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	s	\$
City, State, Zip Code		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	//	\$
City, State, Zip Code	,_/_/_	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$